

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	CTH	749	11-3-01
RESPONSE FORMALITY REVIEW			11-20-01

INDEX OF CLAIMS

☐ = ☐ Rejected
☐ = ☐ Allowed
☐ = ☐ (Through numeral) Canceled
☐ = ☐ Restricted

N Non-elected
 A Interference
 O Appeal
 0 Objected

Claim	Date
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If more than 150 claims or 10 actions
staple additional sheet here

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